



RE: HF 1102 Home and community-based waiver assessment requirements modified for people temporarily entering health care facilities.

Dear Minnesota Legislators,

Hennepin County Medical Center provides acute psychiatric care to our community, including acute, inpatient hospitalizations. Patients admitted to our units present with marked acuity and severity, often presenting a danger to self or others if not treated. Along with this acuity, patients have significant psycho-social confounding factors which impact their care and outcome.

Based on this acuity, many of our patients require time for resumption of medications, addressing legal issues (such as court holds, petitions for commitment) and stabilization. It is essential for patients to return to the community with access to significant support and resources to sustain their well-being, assist in their recovery, and prevent hospitalization.

Once stabilized, a large number of patients remain in the hospital awaiting re-assessment for their CADI waiver. This prolonged hospitalization results in patient dissatisfaction with care, delay in return to the community, additional expense of an unnecessary stay in the hospital, and limitation in access to those beds by other patients in acute need.

<u>HF1102</u> provides a necessary and reasonable contribution to these patients' prompt return to the community with their necessary services, reduction of expenses, and freeing up beds for acute care.

acute care.

I strongly support this measure.

Sincerely,

Eduardo A. Colon Navarro, M.D.

Chair, Department of Psychiatry